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COVER LETTER

TO:

Registration Section
Division of Corporations

MATTHEW & PRESTON, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John H. Wurst

Name of Person

Wurst + Ferrer, LLC

Firm/Company

1818 CROWNWOOD DRIVE

Address

ORLANDO, FLORIDA 32810

John . H. Wurst @ gmail . Com E-mail address: (to be used for future annual report notification)

City/State and Zip Code

For further information concerning this matter, please call:

JOHN H. WURST

,407、**721-8919**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 FEB -4 PM 5: 40

MATTHEW & PRESTON, LLC

SUPPLIANT OF STATE

(Name of the Limited Liability Company as it now appears on our records) 如此 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com	pany were filed on 12/08/2011	and assigned
Florida document number L11000138351		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
WURST & FERRER, LLC, a Florida limite	d liability company	
The new name must be distinguishable and end with the words "L.L.C."	'Limited Liability Company," the designatio	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
	, Florida	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

رت

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** Remove Remove Remove

). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ited	January 2013
	Jan H. Wust
	Signature of a member or authorized representative of a member John H. Wurst
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00